



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

RECEIVED

DHSS Breath Alcohol Program
By Carol Day at 3:56 pm, Aug 19, 2009

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN <u>201186</u>	DATE OF INSPECTION <u>08-10-09</u>
LOCATION OF INSTRUMENT (STREET AND CITY) <u>1007 N. ELM ST. ROLLA, MO. 65401</u>	TIME OF INSPECTION <u>2216 HRS</u>

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER <u>49</u> °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> TIME AND DATE	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34 °C ± 0.2°C) <u>34°</u>	
<input checked="" type="checkbox"/> CALIBRATION CHECK - Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP) <input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE <input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)	

TEST 1 <u>.100</u>	TEST 2 <u>.099</u>	TEST 3 <u>.099</u>
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<input checked="" type="checkbox"/> PERFORM R.F.I. TEST (PRINTOUT ATTACHED)						
<input checked="" type="checkbox"/> NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)						
REFUSALS	<u>2</u> (0-.04)	<u>0</u> (.05-.09)	<u>1</u> (.10-.14)	<u>3</u> (.15-.19)	<u>1</u> (Over .19)	<u>0</u>

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

INSTRUMENT OPERATES WITHIN SPECIFIED GUIDELINES AS SET FORTH BY MO. D.O.H.

MANUFACTURER: REPCO MARKETING, INC. CONCENTRATION: .100 LOT # 09001 EXP. DATE: 04-22-11

INSPECTING OFFICER

SIGNATURE <u>Kenneth L. Moberly</u>	PRINT NAME <u>KENNETH L. MOBERLY</u>
TYPE II PERMIT NUMBER/EXPIRATION DATE <u>820077 / 02-26-10</u>	TELEPHONE NUMBER <u>(571) 364-1213</u>

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.

LOT NUMBER: 09001

EXPIRATION DATE: April 22, 2011 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 09001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1214 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L Breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is April 23, 2009. The expiration date for this lot number is April 22, 2011 at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President
RepCo Marketing, Inc.

IN THE CIRCUIT COURT OF PHELPS COUNTY, MISSOURI
ASSOCIATE DIVISION

STATE OF MISSOURI, Plaintiff)
vs.) Case No. _____
_____, Defendant)

AFFIDAVIT PURSUANT TO SECTION 490.692 RSMo

Before me, the undersigned authority, personally appeared KENNETH MOBERLY, who, being by me duly sworn, deposes as follows: My name is KENNETH MOBERLY. I am of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated:

I am a "Type II Breathalyzer Operator," authorized by the Missouri Department of Health to carry out maintenance checks on a breathalyzer, and I am the custodian of the records of the breathalyzer for the Rolla Police Department, Rolla, Missouri. Attached hereto are _____ pages of records kept by the Rolla Police Department, Rolla, Missouri, in the regular course of business of the Rolla Police Department, Rolla, Missouri, for an employee or representative of the Rolla Police Department, Rolla, Missouri, with knowledge of the act, event, condition, opinion, or diagnosis recorded to make the records or to transmit information thereof to be included in such record; and the records was made at or near the time of the act, event, condition, opinion, or diagnosis. The records attached hereto are the original or exact duplicates of the original.

Kenneth L. Moberly
Affiant

In witness whereof I have hereunto subscribed my name and affixed my official seal this 10th day of August, 2009.

[Signature]
Notary

My Commission Expires:

12-18-2010



DERRICK DILLON
My Commission Expires
December 18, 2010
Phelps County
Commission #06984717

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
ROLLA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201186
08/10/09

TESTING OFFICER:
MOBERLY/KENNETH/L
OFFICER I.D.: 998
PERMIT NUMBER: 820077
EXPIRATION DATE: 02/26/10
MISCELLANEOUS DATA:
MONTHLY MAINTENANCE

--- SUPERVISOR MODE ---

BLANK TEST	.000	22:19
INTERNAL STANDARD	VERIFIED	22:19
EXTERNAL STANDARD	.100	22:20
BLANK TEST	.000	22:20
EXTERNAL STANDARD	.099	22:21
BLANK TEST	.000	22:21
EXTERNAL STANDARD	.099	22:22
BLANK TEST	.000	22:22

N = 3
SIM. = .1
AVG. = .0993

OPERATOR SIGNATURE

Kenneth L. Moberly

CARD STK #
60036

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ROLLA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201186
09/10/09

ARREST TIME: 21:45
SUBJECT NAME:
MOBERLY/KENNETH/L
DOB: 11/26/63 SEX: M
STATE/D.L.: MO/494825265
ARRESTING OFFICER:
MOBERLY/KENNETH/L
OFFICER I.D.: 998
TESTING OFFICER:
MOBERLY/KENNETH/L
OFFICER I.D.: 998
PERMIT NUMBER: 828077
EXPIRATION DATE: 02/26/10
MISCELLANEOUS DATA:
MONTHLY R.F.I. TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	22:26
INTERNAL STANDARD	VERIFIED	22:26
RADIO INTERFERENCE		

OPERATOR SIGNATURE

Kenneth L. Moberly

CARD STK #
60036

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ROLLA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201186
08/10/09
22116

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM (04-07-2009):	OKAY
HEATERS	
SAMPLE CHAMBER:	49c
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFGHI
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmnopqrstuvwxyz
pqrstuvwxyz{|}~

OPERATOR SIGNATURE

Kenneth L. Moberly

CARD STK #
60036

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



KENNETH MOBERLY


Is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

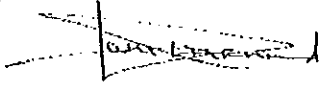
DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 02/26/08
Number 820077
Expires 02/26/2010

MO 550-0771 (7-88)



Director of State Public Health Laboratory


Director, Department of Health

Lab. 4 (R7-88)